PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999

Application or Docket Number

*

		CLAIMS A	S FILED - Column 1)	Small Type	ENTITY	OR	OTHER SMALL			
FC)R	NUMB	mn 2) EXTRA	RATE	FEE] 	RATE	FEE		
ВА	SIC FEE				345.00	OR	1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	690.00		
то	TAL CLAIMS	24	minus 2	X\$ 9=		OR	X\$18=	72		
IND	EPENDENT CL	AIMS 3	minus	X39=		OR	X78=			
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT	+130=		OR	+260=			
* If	the difference	in column 1 is	less than ze	TOTAL		OR	TOTAL	012		
	C	Laims as A	MENDEC	SMALL	CAITITY	OR	OTHER THAN SWALL ENTITY			
		(Column 1)		(Column 2)	(Column 3)	SHAFF			JUNEL	
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	÷	Minus	**	=	X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	*** PENDENT CLAIM	<u> </u>	X39=		OR	X78=	·
	FIRST PRESE	NIATION OF M	OLTIPLE DEF	+130=		OR	+260=			
				TOTAL			TOTAL			
				ADDIT. FEE	<u></u>	OR	ADDIT. FEE			
	<u> </u>	(Column 1)		(Column 2)	(Column 3)		•			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	##	=	X\$ 9=		OR	X\$18=	
A ME	Independent	*	Minus	*** PENDENT CLAIM]=	X39=		OR	X78=	
	FIRST PRESE	INTATION OF IM	OLIFLE DEI	PENDENT CLAIM		+130=		OR	+260=	
						TOTAL ADDIT. FEE		OP	TOTAL ADDIT. FEE	
		(Column 1)		(Column 2)	(Column 3)	ADDIT. FEET		9	ADDI1. 1 CC	
		CLAIMS		HIGHEST			ADDI-	1		ADDI-
AMENDMENTO		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	TIONAL		RATE	TIONAL
	Total	t	Minus	o o	=	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	=	X39=			X78=	
Ø	FIRST PRESE	NTATION OF M	ULTIPLE DE	1.55-		OR		}		
				OR	+260=					
**	If the "Highest Nu	mber Previ usly F	aid For IN THI	umn 2, write "0" in co IS SPACE is less tha IS SPACE is less tha	n 20, enter "20."	ADDIT. FEE		OR	TOTAL ADDIT. FEE	
***If th "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										

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L		CLA	JMS /	AS FILED (Column 1)	- PA		umn 2)			ENTIT	Y		OTHE		
F	FOR NUMBER FILED					NUMBER		PE			OR	OTHER THAI SMALL ENTII		AN TTY	
-	BASIC FEE					NUMBER	EXTRA	RAT	E	FE	E		RATE		EE
-								1.		3,45.	90	OR		1	
•	OTAL CLAIMS			minus	20=	•		XS					X\$18=	 -	
_	DEPENDENT (•	minu	s 3 =	•		<u> </u>			'	OR		_	
M	ULTIPLE DEPE	NDENT C	ZAIM F	PRESENT	•			×/)= ——		_ ⁽	OR	X.80±		
• †	f the difference	e in colur	nn 1 ie	loss than a	050 0	-1		+130)=			OR	+260=	f	
							column 2	TOTA	YL.			OR.	TOTAL		
	1	Colui	AS A	AMENDE									OTHER	THA	N
~ -	1//	an	IMS	T		olumn 2)	(Column 3)/	SMA	Щ	MITT		R	SMALL	ENT	ĬΫ́
A INCINCINE A	Total	REMAI AFT AMEND	ER		PR	YUMBER EVIOUSLY WID FOR	PRESENT EXTRA	RAT	Ε	ADDI TIONA FEE	AL		RATE	TIO	NAL
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Ž		MOITATION	OFM	Minus .	• • • •	<u>3.</u>	= /	x.40			\dashv)R	XXD=		Ι÷
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								_			Ī			
	·											R	+260=		,
		ADDIT, F				R A	TOTAL DOT, FEE								
	1	(Colun	MS		(C)	olumn 2) IGHEST	(Column 3)					_			
	<u> 1</u> 2	REMAII AFTE AMENDI	ER .		PR	UMBER EVIOUSLY AID FOR	PRESERT EXTRA	RATE	=	ADDI TIONA FEE	W.	-	RATE	AD TIOI	VAL
	Total	2	4	Minus	 ,	24	=	X\$ 9				R	X\$18=	_FE	<u>.E_</u>
į	Independent		}	Minus	***	3.	=	xýb		i	\dashv	"		\ -	
	FIRST PRESE	MIAIKON	OF MU	ILTIPLE DEF	END	ENT CLAIM	. 1	~10	_	·	니º	R	XPb=	7	
	·.					÷		+130	_ 1		_ 0	R	+260=	'	\
								ADDIT, F	AL EE		o	R	TOTAL VOOIT, FEE		7
7		(Colum				olumn 2)	(Column 3)					•	OUL FEEL	•	•
	C	REMAIN AFTE AMENDA	VING R		'N PR	IGHEST UMBER EVIOUSLY AID FOR	PRESENT EXTRA	RATE		ADDI TIONA	L.		RATE	AD TIO	
	Total	. 2	-4	Minus	•	24	=	<u> </u>	-	FEE	_	ŀ		FE	
	Independent	• ?	<u> </u>	Minus	•••	2,	-	X\$ 9		_\	_ 0	R	X\$18=		, _
	FIRST PRESE	NTATION	OF MU	ILTIPLE DEF	END	ENT CLAIM	I	X76	:	\		R	X88=		T
									_				+260=		t
	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20. The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								AL.	+		R	TOTAL		1
1	i the "Highest Num The "Highest Num	20, enter 20." 20, enter 3."	ADDIT, F	Œ		\Box^{c}	R	ADOIT, FEE							
	_		TOU	o TESPOIJ Purio	r indep	endent) is the	odenia tradoid e	formed in the				_			

	Applicati	ion or Do	k 1 Number
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PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

		(umn 2)	-	SMALL TYPE	ENTITY	O	OTHE R SMALI	R THAN ENTITY				
	TOTAL CLAIN	Colur					RATE	FE		RATE	FEE	
	FOR	NUMBE	R FILED	NUM	BER EXTRA	1	BASIC FI	EE 370.0	20 Of	BASIC FE	740.00	
;	TOTAL CHARG	EABLE CLAIMS	n	ninus 20=	•			X\$ 9=		OF	X\$18=	
u	NDEPENDENT	CLAIMS		ninus 3 =	4			X42=		OF	X84=	
	MULTIPLE DEPENDENT CLAIM PRESENT									OF	+280=	
•	If the difference	ce in column 1 i	is less than a	zero, enter	"0" in (column 2	•	TOTAL	1	OF	TOTAL	
İ	* If the difference in column 1 is less than zero, enter "0" in column 2 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								ENTITY	OR	OTHER SMALL	THAN
MATA		(Column 1) CLAIMS REMAINING AFTER		(Colum HIGH NUME PREVIO PAID F	EST BER USLY	PRESENT EXTRA		RATE	ADDI- TIONA FEE	•	RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**	<u>on</u>	= .		X\$ 9=		OR	X\$18=	
	Independent	*	Minus .	***		=		X42=		OR	X84=	
4	FIRST PRES	ENTATION OF M	(ULTIPLE DE	PENDENT	CLAIM			+140=		OR	+280=	-
							L	TOTAL		1	TOTAL ADD!T. FEE	
·.					- -	(Column 3)_	ΑC	OOT. FEE I		.2	ADDA I. FOR	
UT B		(Column 1) CLAIMS REMAINING AFTER		(Columnia Highe NUMBE PREVIOL PAID P	ST ER ISLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
OME	Total	* 24	Minus	** 21	/	=		X\$ 9=		OR	X\$18=	
AMENDMENT I	Independent	• 3	Minus	***	2	=	T	X42=		OR	X84=	
٧	FIRST PRESE	ENTATION OF M	ULTIPLE DEF	SENDENT (MAAK			+140=		OR	+280=	
						•	40	TOTAL OIT, FEE		OR	TOTAL ADDIT, FEE	
				(Calum	. 2) ((Column 3)	AU	MI. FEE			. •	
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENOMENT		(Column HIGHES NUMBE PREVIOU PAID FO	ST ER ISLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total ·	*	Minus	44		E	7	K\$ 9=	•	OR	X\$18=	
	Independent	4	Minus	444		=		X42=	•	OR	X84=	
₹	FIRST PRESE	NTATION OF M	UTIPLE DEF	ENDENT	MIAL	3	1.	140=		OR	+280=	
• •	of the entry in column 1 less than the entry in column 2, write "0" in column 3. If the "Highest Number Proviously Paid For" N THIS SPNOE is less than 20, enter "20." If the "Highest Number Proviously Paid For" N THIS SPNOE is less than 2, enter "20."									ļ .	TOTAL DOTT. FEE	
-	l the Wilshard Mrs	mber Proviously Per mber Proviously Per mber Proviously Per	all For IN THE	5	122 Eller	St. Giac. Co.		in the app	ropriate bo	•		COMMERO